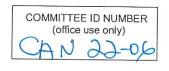
Initial Application	
Amended Application	
Date:	





Candidate	Received
Committee Name (required) (first or last name & office)	ERRE SCHRODER FOR DH COUNCIL
Candidate Information:	Candidate's Name (required): TERRE (TERESA) SCHRODER
	Candidate's mailing address (required): 1435 5. Golden View DR. Dewey at
	Candidate's email address (required): Term Schroder for DH Council @ Gmail. Com
	Candidate's phone number (required): 938-493-0019
	Candidate's website (if any):
Office Sought (choose one):	□ County Office: □ District (if applicable):
	City/Town Office: Louncil Member District (if applicable):
	☐ School Board Office: ☐ District (if applicable):
	□ Special District Board: □ □ District (if applicable):
Election Cycle for Office Sou	ight (year the election will take place) (required): 2022
Party Affiliation: (required for partisan offices)	□ Democrat □ Green □ Libertarian □ Republican □ Other:
☐ Political Action Comr Committee Name (required):	` '
(if sponsored, must include sponsor's name)	
Political Function (optional):	☐ Contributions ☐ Candidate-Related Independent Expenditures
select any that apply)	☐ Ballot Measure Expenditures ☐ Recall Expenditures
Sponsorship Information:	Sponsor's name or nickname (required):
if applicable)	Sponsor's mailing address (required):
	Sponsor's email address (required):
	Sponsor's phone number (if any):
	Sponsor's website (if any):
Special Status	☐ Separate Segregated Fund of a Corporation, LLC, Partnership, or Union
if applicable)	☐ Standing Committee (must also complete separate standing committee registration)
White typical is a second to the second to t	☐ Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications only)
☐ Political Party	
Committee Name (required):	
must include party affiliation)	
lurisdiction:	☐ State Party (must include proof of qualification pursuant to A.R.S. § 16-801 or § 16-804)
	County Party (must include proof of qualification pursuant to A.R.S. § 16-802 or § 16-804)
	☐ Legislative District Party (must include proof of organization pursuant to A.R.S. § 16-823) ☐ City or Town Party (must include proof of qualification pursuant to A.R.S. § 16-802 or § 16-804)
Special Status if applicable)	☐ Standing Committee (must also complete separate standing committee registration)

	Initial Application
	Amended Application
Da	ite:





COMMITTEE INFORMATION:

	1425 S. Golden View DR
Contact Information:	Committee's mailing address (required): DEWEY QZ 86327
	Committee's email address (required): TERRE SCHRODER FOR DACOUNCIL @ g mail, co.
	Committee's phone number (if any): <u>928-493-0019</u>
	Committee's website (if any):
Chairperson's Information:	Chairperson's name (required): TERRE SCHRODER
	Chairperson's physical address (required): 1425 S. Golden View DR., Dewey 078632
	Chairperson's mailing address (if different):
	Chairperson's email address (required): TERRE SCHRODER FOR DH COUNCIL Damil, C
	Chairperson's phone number (required): 478-493-0019
	Chairperson's employer (required): Change & INWOVATION accency, LLC
	Chairperson's occupation (required): Strategic Initiatives Coordinator
Treasurer's Information:	Treasurer's name (required): VIRGINIA LINDER
	Treasurer's physical address (required): 14730 E. WHITE DR. DEWEY AZ \$632
	Treasurer's mailing address (if different): SCHRODERCAMPAIGN TREASURER CO
	Treasurer's email address (required): 4 G MA12, CO M
	Treasurer's phone number (required): 92 F - 910 - 2390
	Treasurer's employer (required): RETIREO
	Treasurer's occupation (required): RETIRED
Bank or Financial Institution:	Bank name (required): ONE ARIZONA CR. UNION
(do not list acct numbers)	Additional bank name (if applicable):
	Additional bank name (if applicable):

DEC

I declare under penalty of perjury that the foregoing information is true and correct. I further declare that I: (1) consent to serve as chairperson or treasurer of the committee named herein, if applicable; (2) designate the above-named committee as my official candidate committee and authorize it to receive/make contributions/expenditures on my behalf, if applicable; (3) have read the Secretary of State's campaign finance and reporting guide; (4) agree to comply with Arizona election law, including campaign finance laws codified at A.R.S. §§ 16-901 to 16-938; and (5) agree to accept all notifications and legal service of process for campaign finance purposes via the email				
	address(es) provided herein. Chairperson's signature:	Date: 9-15-22		
	Treasurer's signature: Maginia William	Date: 9-15-22		
\	Candidate's signature (if applicable):	Date:		

Dewey-Humboldt

SEP 15 2022

Received